TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c)) Docket No. DI-5717			
Re Application Of: V	Vatkins et al.		
PATER Serial No.	Filing Date	Examiner	Group Art Unit
09/871,863	June 1, 2001	Unknown	Unknown
Title: HEMODIALYZER HEA	DER		
	Assistant Com	ddress to: missioner for Patents ton, D.C. 20231	
	37 C	FR 1.97(b)	
1. The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application; within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or before the mailing date of a first Office Action on the merits, whichever event occurs last.			
	37 C	FR 1.97(c)	
2. The Information Disclosure Statement submitted herewith is being filed after three months of the filing of a national application, or the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or after the mailing date of a first Office Action on the merits, whichever occurred last but before the mailing date of either:			
1.	1. a Final Action under 37 CFR 1.113, or		
2. a Notice of Allowance under 37 CFR 1.311,			
whichever occurs first.			
Also submitted herewith is:			
☐ a certification as specified in 37 CFR 1.97(e);			
OR			
the fee set forth in 37 CFR 1.17(p) for submission of an Information Disclosure Statement under 37 CFR 1.97(c).			

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c))			Docket No. DI-5717
Re Application Of: W			
PATER Prial No.	Filing Date	Examiner Unknown	Group Art Unit Unknown
09/871,863	June 1, 2001	UIIKIIOWII	Olikilowii
Title: HEMODIALYZER HEAI	DER		
	(Only complete if Applicant elects t	eent of Fee to pay the fee set forth in 37 CFR 1.17(p)))
☐ A check in the ame☑ The Assistant Con	nmissioner is hereby authorized	to charge and credit Deposit Acco	ount No. 02-1818
	 A duplicate copy of this shee e amount of 	et is enclosed.	
□ Credit any	overpayment.		
	ny additional fee required.		
Certificate of T	Transmission by Facsimile*	Certificate of Mailing by	
I certify that this dideposit account is being States Patent and Trade	ocument and authorization to charge ng facsimile transmitted to the United emark Office (Fax. No.	I certify that this document and on 6/15/01 with the first class mail under 87 C.F.R. 1 Assistant Companissioner for 1980 (20231)	the U.S. Postal Service as
	Signature	Signature of Person Mailin Robert J. Bi	ļ
Typed or Printed l	Name of Person Signing Certificate	Typed or Printed Name of Person	
	y only be used if paying by		
2.	ignature	Dated: June15, 2001	
Robert M. Barrett (30,14) Bell, Boyd & Lloyd LLC			
P.O. Box 1135 Chicago, Illinois 60690-11 Tel: (312) 807-4204	135		
cc:			





IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INFORMATION DISCLOSURE STATEMENT

APPLICANT:

Watkins et al.

DOCKET NO.:

DI-5717

SERIAL NO:

09/871,863

ART UNIT:

Unknown

FILED:

June 1, 2001

EXAMINER:

Unknown

INVENTION:

"HEMODIALYZER HEADER"

Assistant Commissioner for Patents

Washington, D.C. 20231

SIR:

In accordance with the provisions of 37 C.F.R. 1.56, Applicants request that a citation and examination of the references identified below and on the attached PTO-1449 form, copies of which are enclosed, be made during the course of examination of the above-mentioned application for United States Patent.

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Applicants look forward to early and favorable consideration of this matter.

Respectfully submitted,

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